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<p><b>DECLARATION FOR UTILITY OR DESIGN PATENT APPLICATION</b> (37 CFR 1.63)</p> <p><input checked="" type="checkbox"/> Declaration Submitted with Initial Filing      OR      <input type="checkbox"/> Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16 (e)) required)</p>	<b>Attorney Docket Number</b>	3188.001
	<b>First Named Inventor</b>	Alyssa M. Hapgood
	<b>COMPLETE IF KNOWN</b>	
	<b>Application Number</b>	Not Yet Assigned 09/865 948
	<b>Filing Date</b>	Herewith
	<b>Group Art Unit</b>	Unknown 2863
<b>Examiner Name</b>	Unknown Dougherty	

**As a below named inventor, I hereby declare that:**

My residence, mailing address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

Method and Apparatus For Estimating The Weight of Horses

*(Title of the Invention)*

the specification of which

is attached hereto

OR

as United States Application Number or PCT International

was filed on (MM/DD/YYYY)

(if applicable).

Application Number  and was amended on (MM/DD/YYYY)

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?	
				YES	NO
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:

I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below.

Application Number(s)	Filing Date (MM/DD/YYYY)	
		<input type="checkbox"/> Additional provisional application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.



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**DECLARATION — Utility or Design Patent Application**Direct all correspondence to:  Customer Number or Bar Code Label  OR  Correspondence address below

Name DUNLAP, CODDING &amp; ROGERS, P.C., c/o Marc A. Brockhaus

Address 9400 North Broadway, Suite 420

Address

City Oklahoma City

State OK

ZIP 73114

Country United States

Telephone (405) 478-5344

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I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

NAME OF SOLE OR FIRST INVENTOR :

 A petition has been filed for this unsigned inventor

Given Name (first and middle [if any]) Alyssa M.

Family Name or Surname Hapgood

Inventor's Signature 

Date 5/19/01

Residence: City Edmond

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Citizenship U.S.

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State OK

ZIP 73034

Country U.S.

NAME OF SECOND INVENTOR:

 A petition has been filed for this unsigned inventor

Given Name (first and middle [if any]) Joseph P.

Family Name or Surname Hapgood

Inventor's Signature 

Date 5-19-01

Residence: City Edmond

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Country U.S.

Citizenship U.S.

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T Additional inventors are being named on the X supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto.





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<b>POWER OF ATTORNEY OR AUTHORIZATION OF AGENT</b>	<b>Application Number</b>	Not Yet Assigned
	<b>Filing Date</b>	
	<b>First Named Inventor</b>	Alyssa M. Hapgood
	<b>Group Art Unit</b>	Unknown
	<b>Examiner Name</b>	Unknown
	<b>Attorney Docket Number</b>	3188.001

I hereby appoint:

Practitioners at Customer Number

Place Customer  
Number Bar Code  
Label here

OR

Practitioner(s) named below:

Name	Registration Number	Name	Registration Number
Jerry J. Dunlap	17,146	Charles A. Codding	25,099
Christopher W. Corbett	36,109	Nicholas D. Rouse	36,992
Glen M. Burdick	24,230	Marc A. Brockhaus	40,923
Richard A. Nelson	45,995	Kathryn L. Hester	46,768

Douglas J. Sorocco 43,145

as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.

Please change the correspondence address for the above-identified application to:

The above-mentioned Customer Number.

OR

Firm or Individual Name

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I am the:

Applicant/Inventor.

Assignee of record of the entire interest. See 37 CFR 3.71.  
 Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).

**SIGNATURE of Applicant or Assignee of Record**

Name Alyssa M. Hapgood

Signature

Date 5/19/01

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below\*.

\*Total of \_\_\_\_\_ forms are submitted.